WAIVER OF REPORT (Section 106.07(7), F.S.) (PLEASE TYPE)			ONLINE	SUBMIS	SION	
			Id: 538 [1295830] Submitted on: 4/25/2023 05:51:14 (eastern) OFFICE USE ONLY			
Name			Office Sought			
PO Box 1064			Brooksville, Fl 34605			
Address		City		State	Zip Code	
X Candidate	Political Committe	e .	Party Executi	ive Committee		
NOTE: This form does not appl waiver) that no reportable						
Check here if address has	changed since last re	Construction of the second sec	ck here if PC has DISE orts.	BANDED and will no	longer file	
Indicate report # M	Indicate report # P TERMINATION	G	PECIAL ELECTION	Indicate report as applicable:	type and #	
NOTIFICATION OF	NO ACTIVITY IN C	AMPAIGN ACCO	UNT FOR THE REF		OF	
	2/1/2023	THROUGH	2/28/2023			
x						
Signature				Date		
X						
Signature				Date		
REQUIRED SIGNATURES FOR:	Political Committe Chairman and C Party Executive C	ees: Campaign Treasurer	r or Deputy Treasurer or Deputy Treasurer ((2), F.S.)			
Except as noted above for an ECC received) the filing of the requi), in any reporting per red report is <mark>wa</mark> ived.	iod when there has	been no activity in the officer must be notified			